

# Kentucky e-Health Network Board

## October 1, 2008

### DRAFT Minutes

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Meeting No. 27

Capitol Annex – Room 129

3:00 pm – 4:30 pm

#### Board Members in Attendance:

Dr. Carol Steltenkamp, Co-Chair – University of Kentucky  
Dr. Larry Cook, Co-Chair – University of Louisville  
Jim Barnhart – Commonwealth Office of Technology  
Dr. David Bensema – Kentucky Medical Association  
Angie Fain, Proxy for Dr. Ford Brewer – Associated Industries of Kentucky  
David Bolt – Physician Practice Managers  
John Burkholder, Deputy Commissioner - Kentucky Department of Insurance  
Murray Clark – Kentucky Hospital Association  
Deborah Clayton – Kentucky Department of Commercialization and Innovation  
Senator Julie Denton – Senate  
Dr. William Hacker, Commissioner - Kentucky Department of Public Health  
Lee Barnard, Proxy for Betsy Johnson - Kentucky Department of Medicaid Services  
Bruce Klockars – Kentucky Hospital Association & Rural Hospitals  
Ron Carson, Proxy for Interim Council President Dr. Richard Crofts - Kentucky Council on Postsecondary Education  
Dr. Kimberly Williams – Kentucky Medical Association  
Ken Wellman, Proxy for Jack Lord – Health Insurance Business Headquartered in Kentucky  
Larry Mott - Business with Large Scale e-Strategy & Computer Information Technology  
Senator Katie Stine – Senate President Pro Tem

#### Others Present:

Steve Nunn, Deputy Secretary - Cabinet for Health & Family Services

#### Absent:

Barbara Haunz Asher – Citizen at Large  
Rep. Bob DeWeese – House of Representatives  
Janie Miller, Secretary - Cabinet for Health and Family Services  
Rep. Tommy Thompson – House of Representatives

#### Staff:

Barbara Baker, Policy Advisor  
Laura Cole, Project Manager  
April Smith, Project Manager  
Donna Venio, Assistant

The meeting was called to order by Dr. Larry Cook, Co-Chair.

#### Welcome and Introductions

Dr. Larry Cook welcomed everyone to the meeting. Board members were asked to provide introductions. Dr. Hacker reported on the Foundation for a Healthy Kentucky's conference where he conducted a breakout session on the use of information technology to improve access for healthcare. Dr. Williams announced that the Northeast Kentucky RHIO is preparing to seat their Board of Directors.

## **Review and Approval of August Board Minutes**

Deborah Clayton moved to approve the August board minutes; Senator Denton seconded the motion. Motion carried.

## **Project Reports**

### **RTI Update**

Updates were provided to the Board on the Health Information Security and Privacy Collaboration which includes Harmonizing State Privacy Law and the Provider Education Toolkit. Julia Costich reported on Phase One which reviewed 18 standardized scenarios and developed indicators, potential barriers to health information exchange, and proposed solutions. An implementation plan will be developed for those solutions. The goals of the HISPC project were to review policy and practice issues in supporting wide-spread interoperable electronic health information exchange, and to look at variations and barriers to health information exchange implementation. Collaborations and networks were developed within and across states. Phase Two was transitioning between the original scope of work and a series of multi-state collaborations were a national meeting was convened. Seven multi-state collaboratives were established. Kentucky's collaborative is Harmonizing State Privacy Law and is led by the Michigan Public Health Institute and the Loveless Foundation in New Mexico. Participants in this collaborative include: Florida, Kansas, Kentucky Missouri, Texas, Michigan and New Mexico. The timeframe for the deliverables is scheduled for March 2009. Health information exchange legislation from all 50 states is currently being reviewed. The next step is to develop an analytic matrix for state law. Laura Cole updated the Board on the HISPC Provider Education Toolkit. The purpose is to develop educational materials focused on privacy and security to engage providers interested in health information exchange participation and work with provider professional organizations to test those materials. Participants include Tennessee and Louisiana, who are the co-chairs, Florida, Kentucky, Michigan, Missouri, Mississippi and Wyoming. Target providers include primary care and family practice providers for an educational message. Selection of a national-level public relations firm is currently underway. This group will design a messaging campaign for providers about how they can exchange information electronically in a secure and private manner. Testing will be with providers through professional organizations. Kentucky will be able to utilize the message. Possible funding may be available for the extension of this project.

### **Medical Trading Areas Study**

Ray Austin and Carol Hachette from the UofL School of Public Health and Information Sciences presented the final analysis of the Medical Trading Areas Study. Data for this study included the Kentucky Medicaid Program, the Kentucky Hospital Association, and commercial insurers Humana, Anthem Blue Cross Blue Shield and Bluegrass Family Health. The outcome from this study will assist the Board with the facilitation of the exchange of electronic information. Information will be provided to assist in the development of regional health information organizations which will become the focal point for the electronic exchange of health information. The main focus of this project is to identify the geographic origin of patients and the geographic area served by various providers. County was used for the geographic unit of analysis. Fee for service data for 2006 was utilized but did not include the Passport data. Cross-border data for Kentucky patients was received from KHA patient origin data which identified who was entering the state. Commercial insurance data included claims records of over 6,000 from Medicaid, 600,000+ from KHA, 1 million from Anthem, 107,000 from Bluegrass Family Health, and over 15 million from Humana. From this data, a regionalization scheme was developed to identify regions that were medical trading areas based on the patient origin and destination data. The Passport data was not included in the initial analyses because Passport is a managed care program which directs people to specific areas instead of natural patterns of flow. Stakeholders should review the report and provide feedback for further analyses. Next steps will be to overlay the data from the Health IT Adoption Study with the Medical Trading Areas data for health information exchange. David Bolt stated that this was a good initial first step with good data to determine the economic viability and geographic area to make regional organizations work; however, the development of a business plan must be priority. Dr. Bensema stated that relationships must be developed with out-of-state geographic areas for health information exchange. Emphasis should be place on keeping patients in Kentucky rather than seeing them travel outside of our borders for care.

### **Medicaid Transformation Grant Update**

Barbara Baker provided brief comments about the Medicaid Transformation Grant. Over the last month staff have been diligently working on the grant and have come up with some options to connect hospitals across the state focusing on areas in southeastern Kentucky with high Medicaid population, high cost, and high chronic conditions that have the greatest cost within the Medicaid Program. Plans are to take an approach to expand health information exchanges and increase functionality. It is anticipated that the \$4.9M would be utilized for portal development and hospital interfaces. Costs for interfacing could be anywhere from \$1,000 - \$50,000 depending on current infrastructure and systems. Discussion continued on the consideration of possible funding for regional health information organization development and physician practices. Barbara stated that a cost allocation plan for the \$4.9M would be required by CMS.

### **Healthcare Infrastructure Authority Update**

Dr. Bob Estherhay stated that the August minutes were approved which discussed the new vision, *"Healthier Kentuckians Through Information Exchange,"* with a branding called, *"New Generation Healthcare™,"* and the mission, *"The Kentucky e-Health Network, a collaboration of the Kentucky e-Health Network Board, Kentucky e-Health Corporation, and Kentucky Healthcare Infrastructure Authority, will support statewide adoption of health information technology and interoperable health information exchange to enhance the health of all citizens."* The mission statement listed goals and activities that were identified at the retreat. The Steering Committee finalized the vision and mission statement and it is now before the Board to approve the use of the updated vision and mission as a basis for developing a Kentucky e-Health Strategic Plan. Bruce Klockars moved to approve the updated vision and mission; Dr. Hacker seconded the motion. Motion carried. The Strategic Plan development timeline has been extended to December 3<sup>rd</sup> in order to complete the goal work and the asset inventory.

### **Governance Structure Ad Hoc Group Update**

The group, chaired by Drs. Steltenkamp and Esterhay, met last month to examine the current governance structure of the Board as well as other governance structures in order to make recommendations. The group will look at current structures, potential conflicts, and future goals in support of a non-conflicted group of e-health structures.

### **Next Board Meeting**

The next meeting of the Board is scheduled for November 5, 2008 from 3:00 – 4:30 PM at the Capitol Annex, Room 129.

Submitted by Donna Veno  
November 5, 2008